À									Application or Docket Number			
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 108 ho25												
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE OF			OTHER THAN	
Ľ	TOTAL CLAIM	10	10				RATE	FEE	7	RATE	FEE	
F	OR	NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	EE 385.0	OF	BASIC FE	770.00	
Ľ	OTAL CHARG	10 "	/O minus 20=				X\$ 9=		ОЯ	XS18=		
<u> </u>	DEPENDENT		minus 3 =				X43=		OR	X86=		
٣	MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR		,
• !	f the differen		TOTAL		OR		220					
	1		10176	<u> </u>	104	OTHER	770					
Ŀ	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column							SMALI	LENTITY	OR	SMALL	
AMENDMENT A	· · · · · ·	CLAIMS REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.20	Minus	-20	2			X\$ 9=		OR	X\$18=	
¥	Independent	· Z	Minus	J (3		. —		. X43=		OR	X86=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 			
,				•		L	+145=	<u> </u>	OR	+290=		
•	1/9/06	(Caluma 4)	•		•		A	DOIT. FEE		OR	ADDIT. FEE	
_	1 1100	(Column 1) CLAIMS	T	(Columi	ST	(Column 3)	_		Laggi	, ,		
AMENDMENT B		REMAINING AFTER AMENOMENT		PREVIOU PAID FO	ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	- 2	0.		工	X\$ 9=		OR	X\$18=	
	Independent	• 2	Minus	 3	3	E	F	X43=			. X86≖-	
<u> </u>	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT C	LAIM			+145=		OR		
										OR	+290=	
	•			••		•	AC	TOTAL DOIT. FEE		OR A	TOTAL DOT FEE	
_		(Column 1)		(Column		(Column 3)			·•	٠.		·
AMENDMENIC		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	R . SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	•	Minus	••				X\$ 9=		t	X\$18=	FEE
	Independent	•	Minus	***		-	\vdash		_:	OR		
• [IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						F	X43=		OR	X86=	
+145=											+290=	٠ .
If the entry in column 1 is tess than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "20. TOTAL ADDIT. FEE												-
. IJ	ne "Highest Num	mer Previously Paid ber Previously Paid	ID IFOR (TOTAL) OF	o SPACE is le Independent)	ss than is the h	3, enter "3," · ighest number (ropriate box			
	. · •				•			•	•	٠.,		1

BEST AVAILABLE COPV